



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY
ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED

By Carol Day at 11:19 am, May 05, 2015

Complete this report in duplicate at the time of the regular monthly preventative maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.

ALCO SENSOR IV SN 097429	PRINTER SN 03A.2436.100	DATE OF INSPECTION 04/30/2015
LOCATION OF INSTRUMENT (STREET AND CITY) 400 First St Hillsboro		TIME OF INSPECTION 2015 hrs

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

☒ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)

☒ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)

☒ PRINTER WORKING PROPERLY

☒ TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

☒ SIMULATOR SOLUTION

☐ COMPRESSED ETHANOL-GAS MIXTURE

☒ STANDARD SUPPLIER **Guth Lab** LOT # **14110** EXP. DATE **05/01/2016**

☒ SIMULATOR TEMPERATURE (34°C ± 0.2°C) **34°** SIMULATOR SN **S02222** SIMULATOR EXP DATE **03/05/2016**

☒ CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE

☐ 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE

☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 **.099**

TEST 2 **.098**

TEST 3

☒ RFI DETECTOR OPERATING

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS **0**

(0-.04) **0**

(.05-.09) **0**

(.10-.14) **0**

(.15-.19) **0**

(OVER .19) **0**

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

Calibration Performed.

INSPECTING OFFICER

SIGNATURE

Dep. Reather 197

TYPE II PERMIT NUMBER/EXPIRATION DATE

240268 06/12/2016

PRINT NAME

Dep. Richard Beattie

TELEPHONE NUMBER

636 797-5000

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
2875 James Boulevard
Poplar Bluff, MO 63901



GUTH LABORATORIES, INC.

590 NORTH 87th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 14110 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on May 5, 2014, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1206% (w/vol) ethyl alcohol. The expiration date for this lot number is May 1, 2016 at 11:59 PM.

When used in a calibrated Simulator, operating at $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L \pm 3%.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN122211-02 whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.

AS IV Serial no: 097429
Version no: 532B

TEST RECORD 00114

Temp Date Time 210L

Air Blank:
04/30/15 20:39 .000
Calibration Check:
26 04/30/15 20:39 .100

Subject Name

Test #3

Subject I.D.

Operator Name, I.D.

Dep R. Decker 197

Location

400 First St

Hillsboro, Mo 63050

AS IV Serial no: 097429
Version no: 532B

TEST RECORD 00111

Temp Date Time 210L

Air Blank:
04/30/15 20:31 .000
Calibration:
26 04/30/15 20:31 .100

Subject Name

Calibration Check

Subject I.D.

Operator Name, I.D.

Dep R. Decker 197

Location

400 First St

Hillsboro Mo 63050

AS IV Serial no: 097429
Version no: 532B

TEST RECORD 00113

Temp Date Time 210L

Air Blank:
04/30/15 20:35 .000
Calibration Check:
26 04/30/15 20:35 .098

Subject Name

Test #2

Subject I.D.

Operator Name, I.D.

Dep R. Decker 197

Location

400 First St

Hillsboro, Mo 63050

AS IV Serial no: 097429
Version no: 532B

TEST RECORD 00112

Temp Date Time 210L

Air Blank:
04/30/15 20:32 .000
Calibration Check:
26 04/30/15 20:32 .099

Subject Name

Calib Test #1

Subject I.D.

Operator Name, I.D.

Dep R. Decker 197

Location

400 First St

Hillsboro, Mo 63050



STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM

2

PERMIT
TYPE II
RICHARD BEATTIE

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

DATAMASTER, INTOX EC/IR II, ALCO-SENSOR IV W/PRINTER

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 6/12/2014

NUMBER 240268

EXPIRES 6/12/2016

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LA6-4 (R6-10)

MO 580-0771 (6-10)

STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM

INSTRUMENT OPERATOR CARD

The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.

Operator BEATTIE, RICHARD
Permit No 240268
Date Issued 6/12/2014 Date Expires 6/12/2016